



APPLICATION FOR APPROVAL OF SITE & ARCHITECTURAL PLANS AND / OR REQUESTED USES

Complete, notarize, and forward twelve (12) copies to Clerk of the Zoning Board with a **\$500.00 Public Hearing Fee** and the required application filling fee (**see Fee Schedule below**), payable to the City of Stamford. **NOTE:** Cost of required Public Hearing advertisements are payable by the Applicant and performance of required mailing to surrounding property owners is the sole responsibility of the applicant.

Fee Schedule	
Commercial Projects under 20,000 s.f. or Residential Projects under 10 dwelling units.	\$380.00
Commercial Projects 20,000 s.f. to 50,000 s.f. or Residential Projects 10 to 50 dwelling units.	\$730.00
Commercial Projects over 50,000 s.f. or Residential Projects over 50 dwelling units.	\$1080.00

APPLICANT NAME (S): _____

APPLICANT ADDRESS: _____

APPLICANT PHONE #: _____

IS APPLICANT AN OWNER OF PROPERTY IN THE CITY OF STAMFORD? _____

LOCATION OF PROPERTY IN STAMFORD OWNED BY APPLICANT (S): _____

ADDRESS OF SUBJECT PROPERTY: _____

PRESENT ZONING DISTRICT: _____

TITLE OF SITE PLANS & ARCHITECTURAL PLANS: _____

REQUESTED USE: _____

LOCATION: (Give boundaries of land affected, distance from nearest intersecting streets, lot depths and Town Clerk's Block Number)

NAME AND ADDRESS OF OWNERS OF ALL PROPERTY INVOLVED IN REQUEST:

<u>NAME & ADDRESS</u>	<u>LOCATION</u>
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DOES ANY PORTION OF THE PREMISES AFFECTED BY THIS APPLICATION LIE WITHIN 500 FEET OF THE BORDER LINE WITH GREENWICH, DARIEN OR NEW CANAAN? _____ (If yes, notification must be sent to Town Clerk of neighboring community by registered mail within 7 days of receipt of application – PA 87-307).

DATED AT STAMFORD, CONNECTICUT, THIS _____ DAY OF _____ 20_____

SIGNED: _____

NOTE: If applicant wishes to withdraw application, please notify the Zoning Board at least three (3) working days prior to Public Hearing so that the Board may have sufficient time to publicize the withdrawal.

STATE OF CONNECTICUT
ss STAMFORD _____ 20_____
COUNTY OF FAIRFIELD

Personally appeared _____, signer of the foregoing application, who made oath to the truth of the contents thereof, before me.

Notary Public - Commissioner of the Superior Court

FOR OFFICE USE ONLY

APPL. #: _____ Received in the office of the Zoning Board: Date: _____

By: _____